Only

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FEC FORM 1			RGAN							Of	fice Us	e Only			•
1. NAME OF COMMITTEE (ir	n full)		Check if names changed)		xample:If ty ver the lines			12F1	E4M	5					
OHIO REPL	JBLIC	AN PA	RTY ST	ATE	CENTI	RAL &	EX	EC	UT	IVE	EC	MC	MI	TT!	EE
		<sub>1</sub> 211 S. Fi	fth Street												
ADDRESS (number a	nd street)														
(Check if a is changed															
		Columbu	ıs 	1 1 1	1 1 1 1			ОН		432	15	, [	-	1 1	. 1
		Cl	TY▲					STATE	<b>A</b>			ZIP	COD	ΕΔ	
COMMITTEE'S E-MA	AIL ADDRE	SS													
X ◀ (Check if a is changed		warner	@ohiogop.o	rg											
		Optional	Second E-Ma	il Address											
COMMITTEE'S WEB  (Check if a is changed)	address	ohiogop.o	,												
2. DATE 0			2015												
3. FEC IDENTIFIC	CATION N	JMBER ▶	. C	C00162	339										
4. IS THIS STATEN	MENT X	NEW	(N) OF	٦	AME	NDED (A)									
I certify that I have e	examined th	nis Stateme	nt and to the	best of my	y knowledge	and belief	f it is	true,	correc	and	comp	olete.			
Type or Print Name	of Treasure	r Chairma	n Ranae Lentz												
Signature of Treasure	er <i>Chain</i>	man Ranae L	entz		[Electroni	cally Filed]	Da	ate	0	<sup>M</sup> /	2	D /	Y	2015	Y
NOTE: Submission of	false, erron		omplete informa	-		_	-				penalt	ies of	2 U.S	3.C. §	437g.
Office Use					Federal El	r informatior ection Commi 00-424-9530		ict:			FEC (Rev	FC			

Local 202-694-1100

	FFC Fo	rm 1 (Revised 02/2009)	Page <b>2</b>
TYP	E OF C	OMMITTEE	. 490 =
Can	didate	Committee:	
(a)	Ш	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Cominformation below.)	plete the candidate
Nam Cand	e of didate		
	didate / Affiliati	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)	X	This committee is a STA (National, State or subordinate) committee of the REP	(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nnected organization is a:
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	egregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	SENATE BATTLEGROUND FUND FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

Image# 15970675160			
Г			
FEC Form 1 (Revised	02/2009)		Page <b>3</b>
Write or Type Committee Nam	e		
OHIO REPUBLIC	CAN PARTY STATE CEN	NTRAL & EXECUTI	VE COMMITTEE
6. Name of Any Connected	Organization, Affiliated Committee, Joint	Fundraising Representative, or	Leadership PAC Sponsor
REPUBLICAN FINAN	CE COMMITTEE OF HAMILT	ON COUNTY	
	700 Walnut Street Suite 309		
Mailing Address			
	Cincinnati	OH (	45202
	CITY	STATE	ZIP CODE
<ol> <li>Custodian of Records: Ide books and records.</li> </ol>	ntify by name, address (phone number o	optional) and position of the perso	on in possession of committee
	ew J. Borges		
Full Name	,% ORP 211 S 5th St		
Mailing Address			
	Columbus	OH L	43215
Title or Position	CITY	STATE	ZIP CODE
		Telephone number	
8. <b>Treasurer:</b> List the name ar any designated agent (e.g.,	nd address (phone number optional) of the assistant treasurer).	ne treasurer of the committee; and	d the name and address of
Full Name Chairman of Treasurer	Ranae Lentz		
Mailing Address	320 E Sandusky Ave		

Bellefontaine

Title or Position

CITY

43311-2437

ZIP CODE

ОН

STATE

Telephone number

	m 1 (Revised 02/2009)	Page <b>4</b>
Full Name of		
Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
<ol> <li>Banks or Other safety deposit b</li> </ol>	r Depositories: List all banks or other depositories in which the committee deposits funds, holeoxes or maintains funds.	
safety deposit b Name of Bank,	Depository, etc.	
safety deposit b	Depository, etc.  Huntington National Bank	
safety deposit b	Depository, etc.  Huntington National Bank  440 Polaris Parkway	
safety deposit b Name of Bank,	Depository, etc.  Huntington National Bank  440 Polaris Parkway  4th FI	
safety deposit b Name of Bank,	Depository, etc.  Huntington National Bank  440 Polaris Parkway	
safety deposit b Name of Bank,	Depository, etc.  Huntington National Bank  440 Polaris Parkway  4th FI	ZIP CODE
safety deposit b Name of Bank,	Depository, etc.  Huntington National Bank  440 Polaris Parkway  4th FI  Westerville  CITY  STATE	
safety deposit b Name of Bank, Mailing Address	Depository, etc.  Huntington National Bank  440 Polaris Parkway  4th FI  Westerville  CITY  STATE	
safety deposit b Name of Bank, Mailing Address	Depository, etc.  Huntington National Bank  440 Polaris Parkway  4th FI  Westerville  CITY  STATE	
safety deposit b Name of Bank, Mailing Address	Depository, etc.  Huntington National Bank  440 Polaris Parkway  4th FI  Westerville  CITY  STATE  Depository, etc.	
safety deposit b Name of Bank, Mailing Address  Name of Bank,	Depository, etc.  Huntington National Bank  440 Polaris Parkway  4th FI  Westerville  CITY  STATE  Depository, etc.	
safety deposit b Name of Bank, Mailing Address  Name of Bank,	Depository, etc.  Huntington National Bank  440 Polaris Parkway  4th FI  Westerville  CITY  STATE  Depository, etc.	

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#### : 97 'A = G7 9 @ G B9 C I G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F1N Transaction ID:

Form 1 was amended to remove committees no longer actively participating with the party and to add committee that

Form/Schedule: Transaction ID:

Page 6 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ ADDITIONAL ] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ ADDITIONAL ] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor **BOEHNER FOR SPEAKER** 320 FIRST ST. SE Mailing Address 20003 WASHINGTON DC **CITY** STATE 4 ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ ADDITIONAL ] Joint Fundraiser Participant С FEC ID number

Page 7 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ ADDITIONAL ] Name of Bank, Depository, etc. Mailing Address ZIP CODE 🛕 CITY 🗖 STATE **△** [ ADDITIONAL ] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor STARK COUNTY REP PARTY FED ACCT 2727 FULTON RD., NW Mailing Address **CANTON** ОН 44718 **CITY** STATE 4 ZIP CODE Relationship: Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor Connected Organization [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ ADDITIONAL ] Joint Fundraiser Participant С FEC ID number

Page 8 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ ADDITIONAL ] Name of Bank, Depository, etc. Mailing Address ZIP CODE 🛕 CITY 🗖 STATE **△** [ ADDITIONAL ] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor REPUBLICAN PARTY OF CUYAHOGA COUNTY FEDERAL CAMPAIGN COMMITTEE 1500 WEST THIRD STREET Mailing Address **SUITE 120 CLEVELAND** ОН 44113 **CITY** STATE 4 ZIP CODE Relationship: Joint Fundraising Representative Leadership PAC Sponsor Connected Organization Affiliated Committee [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ ADDITIONAL ] Joint Fundraiser Participant С FEC ID number

FEC Form 1G (Revised 06/2011) Page List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ ADDITIONAL ] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ ADDITIONAL ] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Franklin County Republican Party Federal Account 14 E Gay St Mailing Address ОН 43215 Columbus **CITY** STATE 4 ZIP CODE Relationship: **Connected Organization** Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ ADDITIONAL ] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ ADDITIONAL ] Joint Fundraiser Participant С FEC ID number

FEC Form 1G (Revised 06/2011) Page 10 List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ ADDITIONAL ] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ ADDITIONAL ] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor SENATE BATTLEGROUND FUND 228 S WASHINGTON ST Mailing Address **STE 115 ALEXANDRIA** 22314 **CITY** STATE 4 ZIP CODE Relationship: Connected Organization Joint Fundraising Representative Leadership PAC Sponsor Affiliated Committee [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ ADDITIONAL ] Joint Fundraiser Participant С FEC ID number